APR. 18. 2006 2:27PM TO:USPTO

# ZILKA · KOTAB

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#### FAX COVER SHEET

April 18, 2006	Phone Number	Fax Number
Examiner Jila Mohandesi		(571) 273-8300
Dominic M. Kotab		_
: HIT1P051/HSJ920030211US1	App. No: 1	0/727,853
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AT (408) 971-2573 AT YOUR EARLIEST CONVENIENCE

April 18, 2006

# APR 1 8 2006

#### Practitioner's Docket No. HIT1P051/HSJ920030211US1

**PATENT** 

#### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Gillis et al.

Application No.: 10/727,853

Group No.: 3728

Filed: December 3, 2003

Examiner: Jila Mohandesi

For: PROTECTIVE

PROTECTIVE DEVICE FOR REDUCING THE IMPACT OF PHYSICAL SHOCK

Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

# REQUEST FOR CONTINUED EXAMINATION (RCE) (37 C.F.R. § 1.114)

1. Applicant hereby requests continued examination, in accordance with 37 C.F.R. § 1.114, for the above identified application.

#### TIME REQUEST IS BEING MADE

- 2. This request is being submitted:
  - i. Prior to abandonment of the application

#### **ENCLOSURES**

04/19/2086 TL0111

99999931 592587

10727853

3. Enclosed herewith is:

01 FC:1801

798.88 DA

An amendment

#### CERTIFICATION UNDER 37 C.F.R. §§ 1.8(a) and 1.10\*

(When using Express Mail, the Express Mail label number is mandatory;

Express Mail certification is optional.)

I hereby certify that, on the date shown below, this correspondence is being:

#### MAILING

\_deposited with the United States Postal Service in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

37 C.F.R. § 1.8(a) with sufficient postage as first class mail. 37 C.F.R. § 1.10\*

\_\_ as "Express Mail Post Office to Addressee"

Mailing Label No.

(mandatory)

TRANSMISSION facsimile transmitted to the Patent and Trademark Office, (571) 273 - 8300.

Date: 4/18/2002

April Skovmand

(type or print name of person certifying)

Request for Continued Examination (RCE) (37 C.F.R. § 1.114)-page 1 of 3

<sup>\*</sup> Only the date of filing (' 1.6) will be the date used in a patent term adjustment calculation, although the date on any certificate of mailing or transmission under ' 1.8 continues to be taken into account in determining timeliness. See ' 1.703(f). Consider "Express Mail Post Office to Addressee" (' 1.10) or facsimile transmission (' 1.6(d)) for the reply to be accorded the earliest possible filing date for patent term adjustment calculations.

# FEE FOR REQUEST (37 C.F.R. § 1.17(e)).

4. This application is on behalf of other than small entity.

Continued Prosecution Request Fee:

790.00

#### FEE FOR CLAIMS

5. The fee for claims (37 C.F.R. § 1.16(b)-(d)) has been calculated as shown below:

	(Col.1)	(Col. 2) (Col. 3)					OTHER THAN A SMALL ENTITY					
	CLAIMS REMAINING AFTER AMENDMENT	PREV	EST NO. IOUSLY D FOR		ESENT XTRA			RATE			ADDIT. FEE	
TOTAL	27	_	27	=	0	x	\$	50.00	=	\$	\ <u>\</u>	0.00
INDEP.	3	-	3	=	0	x	\$	200.00	=	\$		0.00
FIRST PE	RESENTATION OF	MULT	IPLE DEI	P. CL	AIM	+	\$	360.00	=	\$		0.00
							4	TOTAL ADDIT. FEE		\$		0.00

No additional fee for claims is required.

#### **EXTENSION OF TIME**

6. The proceedings herein are for a patent application, and the provisions of 37 C.F.R. § 1.136(a) apply.

Applicant believes that no extension of time is required. However, this is a conditional petition and authorization to pay the necessary fees to provide for the possibility that applicant has inadvertently overlooked the need for a petition and fee for extension of time.

#### TOTAL FEE(S) DUE

7. The total fee(s) due is/are:

Continued Prosecution Fee (Section 1.17(e)) Fee(s) for additional claims (Section 1.16(b)-(d))	\$790.00 \$0.00
Total Fee(s) Due:	\$790.00

#### PAYMENT OF FEE(S) DUE

8. Please pay the fee(s) for this continued examination application as follows:

Charge Account 50-2587 the sum of \$790.00 (Order no. HSJ920030211US1).

Please charge any required additional fee(s) for § 1.17(e), § 1.16(b)-(d) and/or § 1.17(a)(1)-(4) to Account 50-2587 (Order no. H\$J920030211US1).

#### INVENTORSHIP

This application as amended names as inventors the same inventors as previously designated for the claims.

Date:

Reg. No.: 42,762

Tel. No.: 408-971-2573 Customer No.: 50535 Signature of Practitioner

Dominic M. Kotab Zilka-Kotab, PC

P.O. Box 721120

San Jose, CA 95172

**USA** 

# REGEIVED CENTRAL FAX CENTER

# APR 1 8 2006

**PATENT** 

### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the application of

Gillis et al.

Application No. 10/727,853

Filed: 12/03/2003

For: PROTECTIVE DEVICE FOR REDUCING THE IMPACT OF PHYSICAL SHOCK

Date: April 18, 2006

#### CERTIFICATE OF FACSIMILE

I hereby certify that this correspondence is being facsimile transmitted to the Commissioner for Patents via facsimile to fax number: (571) 273-8300 on April 18, 2006.

Signed:

April Skovmand

## AMENDMENT WITH RCE 37 C.F.R. §1.114

Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Together with the enclosed Request for Continued Examination (RCE, 37 C.F.R. §1.114) and prior to a first action on the merits, kindly amend the claims as indicated below. Applicant also submits the necessary fees.